

SOUTH CAROLINA CIVIL AIR PATROL ACTIVITY REQUEST/APPROVAL	
Type of Activity:	
Requesting Unit/Hq Staff Section:	
Proposed Location:	
Primary Dates(s):	Alternate Date(s):
Project Officer:	Phone Number(s):
Participants: (Units, # of senior/cadets, non-members, etc.) <div style="border-bottom: 1px dashed black; height: 1em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dashed black; height: 1em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dashed black; height: 1em;"></div>	

Signature of Unit Commander/Requestor: \_\_\_\_\_ Date: \_\_\_\_\_

SUPPORT NEEDED: (check all that apply)
<input type="checkbox"/> <u>Operations</u> (Aircraft, aircrews, instructors, etc)
<input type="checkbox"/> <u>Logistics</u> (Vehicles, facilities, equipment, etc)
<input type="checkbox"/> <u>Other Staff</u> (Specify staff section and items needed)
<input type="checkbox"/> <u>CAP-USAF Liaison Officer</u> (Military aircraft, access to military facilities, military support, etc)

FUNDING:
<input type="checkbox"/> Unit/Member Funded –OR– <input type="checkbox"/> Wing Funding      Amount Requested \$ _____
NOTE: If Wing funding is indicated, attach an activity budget with projected income, expenses, and Wing support needed.

WING HEADQUARTERS ACTION: <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Approved w/ exceptions
Wing funding approved: \$ _____      Remarks, activity restrictions, etc.: _____ <div style="border-bottom: 1px dashed black; height: 1em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px dashed black; height: 1em;"></div>
Wing Commander Signature: _____ Date: _____